TENNESSEE GEOGRAPHIC ALLIANCE, INC.
Travel and Expenses Voucher

Name:_____ Date: _____

Address: _____
Street and No. City State Zip

Reason for Travel or Other Expense: _____

If claim is for travel, give date and time of departure _____, and return _____
Date Time Date Time

RECORD OF EXPENSES
(See back of page for expense limits)

ENTER AMOUNTS UNDER EACH EXPENSE ITEM

DATE Month/Day	Where Incurred	Lodging	Breakfast	Lunch	Dinner	Transport	OTHER EXPENSES Description	Amount	Line Total
Expense Totals									

I certify that the above stated expenses were incurred by me while traveling or in conjunction with other approved business for the Tennessee Geographic Alliance, Inc.

_____ _____
Signature of Person Incurring Expenses Date

Approved: _____ _____
Alliance Coordinator Date